

**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	ITR0041
First Named Inventor	Ciliberto, Gennaro
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ORTHOGONAL GENE SWITCHES

the specification of which

(Title of the Invention)

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

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60/514,362	10/24/2003	ITR0041PV

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☐ Practitioners Associated with the Customer Number

OR

☒ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number
Yang Xu	45,243	Jack L. Tribble	32,633

Direct all correspondence to: ☒ Customer Number 000210

Name	Yang Xu, Ph.D.				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-1307	Fax	(732)594-4720

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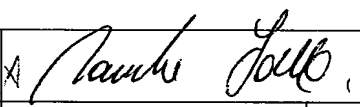
Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])			Family Name or Surname		
Gennaro			Ciliberto		
Inventor's Signature				Date	
Residence: City	Rome	State		Country	Italy
				Citizenship	Italian
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600				

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Raffaele				De Francesco			
Inventor's Signature						Date	
Residence: City	Marino	State		Country	Italy	Citizenship	Italian
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Fattori				Daniela			
Inventor's Signature						Date	Oct 22 ^d 2004
Residence: City	Genzano	State		Country	Italy	Citizenship	Italian/Swiss
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY

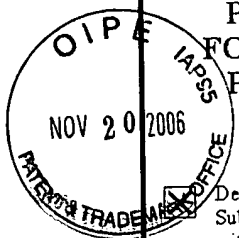
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Paola				Gallinari			
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Olaf Daniel				Kinzel			
Inventor's Signature						Date	
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Uwe					Koch						
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Residence: City		Rome		State		Country		Italy		Citizenship German	
Mailing Address		Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600									
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Inventor's Signature							Date				
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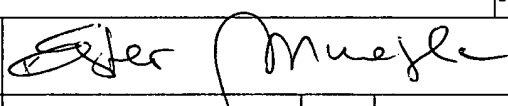
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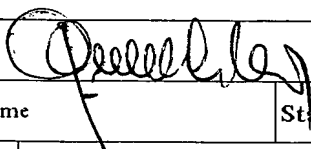
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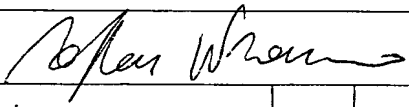
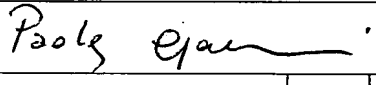
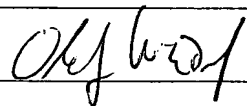
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Given Name (first and middle [if any])			Family Name or Surname		
Gennaro			Ciliberto		
Inventor's Signature				Date	October 12, 2004
Residence: City	Rome	State		Country	Italy
				Citizenship	Italian
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600				
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Inventor's Signature				Date	20 Oct 04		
Residence: City	Rome	State		Country	Italy	Citizenship	German
Mailing Address	Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600						
City	Pomezia, Rome	State		ZIP	00040	Country	ITALY

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname						
Uwe					Koch						
Inventor's Signature		<i>Uwe Koch</i>					Date		OCTOBER 15, 2004		
Residence: City		Rome		State				Country		Italy	
Citizenship		German									
Mailing Address		Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600									
City		Pomezia, Rome		State				ZIP		00040	
Country		ITALY									
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname						
Ester					Muraglia						
Inventor's Signature							Date				
Residence: City		Rome		State				Country		Italy	
Citizenship		Italian									
Mailing Address		Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600									
City		Pomezia, Rome		State				ZIP		00040	
Country		ITALY									
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname						
Carlo					Toniatti						
Inventor's Signature		<i>Carlo Toniatti</i>					Date		OCTOBER 15, 2004		
Residence: City		Rome		State				Country		Italy	
Citizenship		Italian									
Mailing Address		Istituto di Ricerche di Biologia Molecolare P. Angeletti, Via Pontina KM 30.600									
City		Pomezia, Rome		State				ZIP		00040	
Country		ITALY									
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname						
Inventor's Signature							Date				
Residence: City				State				Country			
Citizenship											
Mailing Address											
City				State				ZIP			
Country											